CLAIMS AS FILED - PART	PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004									Application or Docket Number			
SANCE   SANC	CLAIMS AS FILED - PART I SMALL ENT									ITY	TY OTHER THAN		
BASIC FEE	115	NATIONAL S	STAGE FEES	(Column 1)		(Column 2)		<b>]</b> . [			1 .		<del></del>
EXAMINATION FEE    Satisfies PCT Article 39(1)   \$100 / \$200   \$100 / \$200   \$2				01411 515 0.450					-		ا ا	<u> </u>	FEE
SEARCH FEE	BASIC FEE			<u> </u>					<b> </b>	150	OR	BASIC FEE	<u> </u>
SEARCH FEE	EXAMINATION FEE			(4) = \$50/\$100					EXAM. FEE	100		EXAM. FEE	
TOTAL CHARGEABLE CLAIMS    Minus 20	SEARCH FEE .			ALL other countries =					SEARCH FEE	<u>వక్ర</u> ర		SEARCH FEE	
NDEPENDENT CLAIMS	FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≐		X \$ 125 =			X \$ 250 =	
MULTIPLE DEPENDENT CLAIM PRESENT	TOTAL CHARGEABLE CLAIMS			35 mir	nus 20 =	* j	5		X \$ 25 =	375	OR	X \$ 50 =	750
* If the difference in column 1 is less than zero, enter "0" in column 2  ** If the difference in column 1 is less than zero, enter "0" in column 2  ** CLAIMS AS AMENDED - PART II  ** (Column 1)  ** CLAIMS REMAINING AFTER AMENDMENT  ** Total * Minus *** =	INDEPENDENT CLAIMS				inus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
CLAIMS AS AMENDED - PART II	MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
VALUAN   COLUMN 1	* If	the difference	in column 1 is	less than zero	, enter "(	)" in cc	olumn 2	i :	TOTAL		OR	TOTAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			(Column 1)  CLAIMS  REMAINING  AFTER		(Colur HIGH NUM PREVIO	(Column 2) (Column HIGHEST NUMBER PRESEN PREVIOUSLY EXTRA				ADDI- TIONAL	OR	SMALL E	•
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total	*	Minus ,	**		=		X \$ 25 =		OR	X \$ 50 =	
TOTAL ADDIT   OR   TOTAL ADDIT   FEE		Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
Column 1)		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + \$						+ \$ 180 =		OR	+ \$ 360 =		
CColumn 1)								J .			OR		
HIGHEST NUMBER PREVIOUSLY PAID FOR  Total * Minus *** =			(Column 1)		(Calum	2\	(Calumn 2)				-	·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	AMENDMENT B		CLAIMS REMAINING AFTER	MS HIGHING NU		HEST MBER PRESENT IOUSLY EXTRA			RATE	TIONAL		RATE	ADDI- TIONAL FEE
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total	*	Minus	**		=	·	X \$ 25 =		OR	X \$ 50 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
	لببس	<del></del>									OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".	*	If the entry in colu	ımn 1 is less than tho ımber Previously Pal	e entry in column 2 id For" IN THIS SF	2, write "0" i	in columr s than '2'	n 3. 0'. enter "20".		· .		,		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.